

<b>CERTIFICATE OF MAILING</b> I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.  Signature: _____  Name: _____	<table border="1" style="width: 100%;"><tr><td colspan="2">In re Application of: Corvi Mora et al.</td></tr><tr><td>Application Number: 10/537,190</td><td>Filed: December 2, 2003</td></tr><tr><td colspan="2">For: QUATERNARY COMPOUNDS COMPRISING PROPOLIS AS THE ACTIVE SUBSTANCE</td></tr><tr><td>Group Art Unit: 1651</td><td>Examiner: Aaron J. Kosar</td></tr></table>	In re Application of: Corvi Mora et al.		Application Number: 10/537,190	Filed: December 2, 2003	For: QUATERNARY COMPOUNDS COMPRISING PROPOLIS AS THE ACTIVE SUBSTANCE		Group Art Unit: 1651	Examiner: Aaron J. Kosar
In re Application of: Corvi Mora et al.									
Application Number: 10/537,190	Filed: December 2, 2003								
For: QUATERNARY COMPOUNDS COMPRISING PROPOLIS AS THE ACTIVE SUBSTANCE									
Group Art Unit: 1651	Examiner: Aaron J. Kosar								

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- |   |               |
|---|---------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130)                 | \$ _____      |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490)               | \$ _____      |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1110) | \$ <u>555</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730)             | \$ _____      |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350)            | \$ _____      |
- ☒ Applicant claims small entity status.
- ☐ A check to cover the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 141138. I have enclosed a duplicate copy of this sheet.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

_____ /Joseph M. Noto/ Signature	_____ February 4, 2009 Date
_____ Joseph M. Noto Typed or printed name	_____ (585) 263-1601 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.